

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1/2011
1638\$

) Examiner: R. Kallis
) Group Art Unit: 1638
) Docket No.: 8064-005-DIV1
) Date Mailed: March 28, 200:
))

Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

(37 C.F.R. §1.8a)

Dear Sir:

I hereby certify that the following documents:

Transmittal (1 page); Fee Transmittal for FY 2005 (1 page; in duplicate); Amendment and Response under 37 C.F.R. § 1.121 (28 pages); and a self-addressed, stamped postcard

(along with any referred to as being attached or enclosed) are being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to Mail Stop: AF, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

	Vickie L. Lefebvre
	Name of Person Mailing Paper
March 28, 2005	Verki Z. Zefelon
Date of Deposit	Signature of Person Mailing



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Examiner: R. Kallis
J. Chappell et al.)	Group Art Unit: 1638
Serial No.: 09/514,513)	Docket No.: 8064-005-DIV1
Filed: February 28, 2000)))	Date Mailed: March 28, 2005
For: CHIMERIC ISOPRENOID)	
SYNTHASES AND USES THEREOF)	

TRANSMITTAL

Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith on behalf of Applicant is an Amendment and Response under 37 C.F.R. Section 1.121, timely filed prior to the due date of May 10, 2005.

Also submitted herewith in duplicate is a Fee Transmittal for FY 2005 for the additional claims fee of \$50.00 (for two new dependent claims).

Additionally, please charge any additional fee(s) or underpayment of fee(s), or credit any overpayments to **Deposit Account No. 502235**.

A self-addressed, first-class postage-prepaid postcard is enclosed. Please stamp the postcard received and return it to us.

Respectfully submitted,

Michael B. Farber, Ph.D., Esq.

CATALYST LAW GROUP, APC

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

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Fees pursuant to the Consolidate	on 12/08/200	04.		Com	plete if Know	ın <u> </u>
			 Application Nur 	nber 09/5	514,513	
FEE TRA	4N2	IVII I AL	Filing Date	Feb	ruary 28, 2000)
For	FY 20	05	First Named Inv	ventor J. C	happel, et al.	
Applicant claims small on	stitu etatue	Son 37 CED 1 27	Examiner Name	e R. K	Callis	
Applicant claims small en	Illiy status.	See 37 CFR 1.27	Art Unit	163	8	
TOTAL AMOUNT OF PAYME	NT (\$)		Attorney Docke	t No. 806	4-005-DIV1	
METHOD OF PAYMENT (check all t	hat apply)	·			
Check Credit Ca	rd \square_{M}	oney Order N	None Other (please identify):	
Deposit Account Depo	osit Account I	Number: <u>502235</u>	Deposit A	ccount Name:_		
For the above-identified	d deposit ad	count, the Director is	hereby authorized to	: (check all th	nat apply)	
√ Charge fee(s) in	dicated belo	ow	Charg	je fee(s) indic	cated below, exc	cept for the filing fee
) or underpayments o	of fee(s) Credi	t any overpay	ments	
under 37 CFR 1 WARNING: Information on this fo	orm may bec	/ ome public. Credit card	d information should n	ot be included	on this form. Pr	ovide credit card
information and authorization on	PTO-2038.					
FEE CALCULATION		×	<u> </u>			
1. BASIC FILING, SEARC	H, AND E. FILING FI		SARCH FEES	FXAMINA	TION FEES	
AnationAlon Tomo	Sn	nall Entity	Small Entity	5	Small Entity	Food Doid (\$)
			e (\$) Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150 50		200	100	,
Design	200	100 10		130	65	
Plant	200		00 150	160	80	
Reissue	300	150 50		600	300	
Provisional	200	100	0 0	0	0	
2. EXCESS CLAIM FEES Fee Description					Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (inc	luding Re	issues)			50	25
Each independent claim		ncluding Reissues)			200	100
Multiple dependent clai					360	180
	xtra Claim		Fee Paid (\$)		-	pendent Claims
31 - 20 or HP = HP = highest number of total cla		x <u>25</u> = _	50		<u>Fee (\$)</u>	Fee Paid (\$)
	xtra Claim		Fee Paid (\$)			
5 - 3 or HP =	0	_x=_				
HP = highest number of indepen		paid for, if greater than 3.	•			
3. APPLICATION SIZE FE If the specification and dr	:E rawings ex	ceed 100 sheets of	paper (excluding	electronical	ly filed sequer	nce or computer
listings under 37 CFR						
sheets or fraction ther	eof. See 3	35 U.S.C. 41(a)(1)(G) and 37 CFR 1.1	l6(s).		
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =						
4. OTHER FEE(S) Non-English Specificat	tion. \$13		·	mole nambe	·/ ^	Fees Paid (\$)
Other (e.g., late filing surcharge):						
	Α					
SUBMITTED BY /	' 	£ 1911.	Registration No.		T-1	-
Signature Offun		NAM	Registration No. (Attorney/Agent)	32,612		^{ne} 858-450-0099
Name (Print/Type) Michael B. E.	orbor Eca	-			Date Mar	rch 28 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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AMENDMENT AND RESPONSE UNDER 37 C.F.R. § 1.121

Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated February 10, 2005, please amend the above-identified patent application as follows:

04/01/2005 MAHMED1 00000002 502235 09514513

01 FC:2202

50.00 DA